



Dart Hawkesbury  
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Hawkesbury, ON  
K6A 1K7  
Canada

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**D119-796-241**  
**Job Sheet 164349**



**Part No:** D119-796-241

**Job Qty:** 1 ea

**Part Name:** Aft Crosstube Installation Without Step (No Hardware)



**Part Weight:** 0 lbs

**Status:** New

**Priority:** Medium

**Job Created:** 9/30/17

**Job Tracking No:**

**Due Date:** 10/31/17

**Created By:** Mario Poulin

**Type:** Stock

**Description:**

**Note:** DWG REV J IPP REV:A 14.09.03 NEW ISSUE DD VERF:JLM IPP REV:B 14.10.15 AS PER REV.B DD VERF:JLM IPP REV:C 14.11.19 AS PER REV.C DD VERF:JLM IPP REV:D 14.12.12 AS PER REV.pd1 DD VERF:JLM IPP REV:E 15.02.11 AS PER REV F JLM VERIFIED BY:DD IPP REV:F 17.05.08 AS PER IIN REV.F DD VERF:JFS

**Ship Via:**

### Bill of Materials

| Part/Part Name                                                              | Part Note                                                                                                                                                                                                                                                                                   | Serial No | Quantity | Location |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|----------|
| D119-796-241<br>Aft Crosstube<br>Installation Without Step<br>(No Hardware) | DWG REV J IPP REV:A 14.09.03 NEW ISSUE DD VERF:JLM IPP REV:B 14.10.15 AS PER REV.B DD VERF:JLM IPP REV:C 14.11.19 AS PER REV.C DD VERF:JLM IPP REV:D 14.12.12 AS PER REV.pd1 DD VERF:JLM IPP REV:E 15.02.11 AS PER REV F JLM VERIFIED BY:DD IPP REV:F 17.05.08 AS PER IIN REV.F DD VERF:JFS |           | 0.000    |          |
| CR3212-4-07<br>Cherry Rivet                                                 |                                                                                                                                                                                                                                                                                             |           | 0.000    |          |
| D119-796-241TRN<br>Crosstube Turning<br>Detail                              | DWG REV J IPP REV A RQ 14/05/27 VERIFIED BY DD IPP REV:B 16.05.04 AS PER DWG REV.I DD VERF:JLM                                                                                                                                                                                              |           | 0.000    |          |
| D2873-043<br>Nut Plate Assembly                                             | DWG REV A IPP A 05.09.13 New issue KJ/JLM                                                                                                                                                                                                                                                   |           | 0.000    |          |
| D5122-1<br>Center Support, Upper                                            | DWG REV A SHEETS 1,2 IPP REV.A NEW ISSUE JFS 14/07/16 VERIFIED BY: DD                                                                                                                                                                                                                       |           | 0.000    |          |
| D5123-1<br>Clamp Cushion                                                    | DWG REV D IPP REV:A NEW ISSUE 14/08/08 JLM VERIFIED BY:RQ IPP REV:B 16-11-11 AS PER DWG REV.D DD VERF:JLM                                                                                                                                                                                   |           | 0.000    |          |
| D5123-5<br>Clamp Cushion                                                    | DWG REV D IPP REV:A NEW ISSUE 14-08-28 VERIFIED BY:DD IPP REV:B 16-11-11 AS PER DWG REV.D DD VERF:JLM                                                                                                                                                                                       |           | 0.000    |          |
| D5134-041<br>Damper Support<br>Assembly, LH                                 | DWG REV B IPP REV:A NEW ISSUE 14-09-09 JLM VERIFIED BY:DD                                                                                                                                                                                                                                   |           | 0.000    |          |
| D5134-042<br>Damper Support<br>Assembly, RH                                 | DWG REV B IPP REV:A NEW ISSUE 14-09-09 JLM VERIFIED BY:DD                                                                                                                                                                                                                                   |           | 0.000    |          |
| D5136-1<br>Contact Pad, LH                                                  | DWG REV A IPP rev A RQ verified by: JLM                                                                                                                                                                                                                                                     |           | 0.000    |          |
| D5136-2<br>Contact Pad, RH                                                  | DWG REV A IPP rev:A NEW ISSUE 14.09.02 RQ verified by JLM                                                                                                                                                                                                                                   |           | 0.000    |          |
| D5152-043<br>Aft Post Mount<br>Assembly                                     | DWG REV B SHEET 1 IPP REV:A 15.01.09 NEW ISSUE DD VERF:JLM                                                                                                                                                                                                                                  |           | 0.000    |          |
| MS21920-25<br>Clamp                                                         |                                                                                                                                                                                                                                                                                             |           | 0.000    |          |
| MS21920-28<br>Clamp                                                         | DWG REV PA6                                                                                                                                                                                                                                                                                 |           | 0.000    |          |
| AN174-3A<br>Bolt                                                            |                                                                                                                                                                                                                                                                                             |           | 0.000    |          |
| D5515-1<br>Grounding Clamp                                                  | DWG REV A IPP REV:A 17.02.24 NEW ISSUE DD VERF:JFS IPP REV:B 17.02.07 AS PER DWG REV.A DD VERF:JFS                                                                                                                                                                                          |           | 0.000    |          |
| MS21042-4<br>Nut                                                            |                                                                                                                                                                                                                                                                                             |           | 0.000    |          |

SCRAP



## Job Routing

| Op No | Operation           | Qty   | Due Date | Standard  |         | Workcenter/Supplier   |           |
|-------|---------------------|-------|----------|-----------|---------|-----------------------|-----------|
|       |                     |       |          | Setup hrs | Run Hrs | Workcenter / Supplier | Lead Time |
| 90    | Start up Operation  | 1 Ea  | 10/28/17 | 0.00      | 0.00    | Start up container    |           |
| 110   | DC                  | 1 pcs | 10/28/17 | 0.00      | 0.00    | DC                    |           |
| 120   | Packaging           | 1 pcs | 10/28/17 | 0.00      | 0.00    | Packaging1            |           |
| 130   | CNC Bend Crosstubes | 1 pcs | 10/30/17 | 4.67      | 4.17    | CNC Bend Crosstube    |           |
| 140   | QC                  | 1 pcs | 10/30/17 | 0.00      | 0.00    | QC15                  |           |
| 145   | Crosstubes          | 1 pcs | 10/30/17 | 0.00      | 2.50    | Crosstube             |           |
| 150   | Crosstubes          | 1 pcs | 10/30/17 | 0.00      | 2.50    | Crosstube             |           |
| 160   | HandFXtube          | 1 pcs | 10/30/17 | 0.00      | 1.28    | HandFinish5           |           |
| 170   | QC                  | 1 pcs | 10/30/17 | 0.00      | 0.00    | QC7                   |           |
| 175   | QC                  | 1 pcs | 10/30/17 | 0.00      | 0.00    |                       |           |
| 180   | Outsource           | 1 pcs | 10/30/17 | 0.00      | 0.00    | Outsource2            |           |
| 190   | Packaging           | 1 pcs | 10/30/17 | 0.00      | 0.00    | Packaging2            |           |
| 200   | QC                  | 1 pcs | 10/30/17 | 0.00      | 0.00    | QC5                   |           |
| 230   | SprayPaint          | 1 pcs | 10/30/17 | 0.00      | 0.88    | Spray Paint           |           |
| 240   | QC                  | 1 pcs | 10/30/17 | 0.00      | 0.00    | QC14                  |           |
| 242   | Crosstubes          | 1 pcs | 10/30/17 | 0.00      | 2.50    | Crosstube             |           |
| 244   | QC                  | 1 pcs | 10/30/17 | 0.00      | 0.00    | QC5                   |           |
| 246   | SprayPaint          | 1 pcs | 10/30/17 | 0.00      | 0.88    | Spray Paint           |           |
| 248   | SprayPaint          | 1 pcs | 10/30/17 | 0.00      | 0.88    | Spray Paint           |           |
| 250   | QC                  | 1 pcs | 10/30/17 | 0.00      | 0.00    | QC14                  |           |
| 252   | Crosstubes          | 1 pcs | 10/31/17 | 0.00      | 2.50    | Crosstube             |           |
| 260   | QC                  | 1 pcs | 10/31/17 | 0.00      | 0.00    | QC5                   |           |
| 270   | Packaging           | 1 pcs | 10/31/17 | 0.00      | 0.00    | Packaging1            |           |
| 280   | QC                  | 1 pcs | 10/31/17 | 0.00      | 0.00    | QC4                   |           |
| 290   | Packaging           | 1 pcs | 10/31/17 | 0.00      | 0.00    | Packaging3            |           |
| 300   | QC21-FG             | 1 Ea  | 10/31/17 | 0.00      | 0.00    | QC21                  |           |

Part Op 110 - Photocopy bluefile and create labels as per PPP D119-796-241 chg 004

Descriptions: 130 - Bend tube as per Dwg D119-796-241 using CNC bender program

145 - 1- CUT TUBE AT HEIGHT ON FAI SHEET

150 - \*\*\*\*\* ENSURE PROPER JIG POSITIONING \*\*\*\*\*

160 - \*\*\*IMMEDIATELY AFTER GRINDING\*\*\*

180 - \*\*\* WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE\*\*\*

190 - Ensure copy of NDT results attached to work order.

200 - \*\*\* WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE\*\*\* Inspect for damage &amp; ensure results are as per Dwg D119-796-241

230 - \*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O \_\_\_\_\_

240 - \*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O \_\_\_\_\_

242 - Assemble as per dwg D119-796-241 and QSI 2- Install D5152-043 with proseal 890 on concave surface, 0.100"

MIN thick as per dwg using DT10112 (identified right and left) 3- Install center support without bonbing. 4- Install Damper support and contact pads using proseal 890 per dwg and clamp in position.

244 - \*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O \_\_\_\_\_

246 - \*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O \_\_\_\_\_

248 - \*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O \_\_\_\_\_

250 - \*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O \_\_\_\_\_

252 - 1- Re-install non fixed hardware per dwg \*\*\*Torque clamps on damper and contact pad to 80-100 IN-LBS.\*\*\* 2-

Apply a filet-seal of proseal 890 around damper supports and contact pads.

260 - \*\*\*RE-CHECK TORQUE ON CLAMP AFTER PROSEAL HAS CURED AS PER DWG.\*\*\* 1- ATTACH A RED TAG TO CENTER SUPPORT THAT READS CENTER SUPPORT NOT FIXED THEN DATE AND STAMP IT.

290 - Identify and pack for shipping as per PPP D119-796-241

## Job Allocations

| Operation             | Component Part  | Required | Inventory | Allocated | Std Qty |
|-----------------------|-----------------|----------|-----------|-----------|---------|
| 90-Start up Operation | D119-796-241TRN | 1        | 0         | 0         | 0       |
| 242-Crosstubes        | CR3212-4-07     | 16       | 0         | 0         | 0       |
|                       | D2873-043       | 4        | 0         | 0         | 0       |
| 252-Crosstubes        | D5122-1         | 1        | 0         | 0         | 0       |
|                       | D5123-1         | 6        | 0         | 0         | 0       |

|               |            |   |   |   |   |
|---------------|------------|---|---|---|---|
|               | D5123-5    | 2 | 0 | 0 | 0 |
|               | D5134-041  | 1 | 0 | 0 | 0 |
|               | D5134-042  | 1 | 0 | 0 | 0 |
|               | D5136-1    | 1 | 0 | 0 | 0 |
|               | D5136-2    | 1 | 0 | 0 | 0 |
|               | D5152-043  | 2 | 0 | 0 | 0 |
|               | MS21920-25 | 6 | 0 | 0 | 0 |
|               | MS21920-28 | 2 | 0 | 0 | 0 |
| 270-Packaging | AN174-3A   | 2 | 0 | 0 | 0 |
|               | MS21042-4  | 2 | 0 | 0 | 0 |

### Part Specifications

Specifications could not be found.

Plex 10/2/17 12:39 PM Dart.lajeunesse.marie

**Work Order ID 164349**

Wednesday, July 19, 2017 11:10:38 AM

**\*164349\***

Page 1

Item ID: D119-796-241

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: DAS 21 Date: JUL 19 2017 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: 9-89 Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***  
Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

| Draw Nbr     | Revision Nbr |
|--------------|--------------|
| D119-796-241 | J            |

|     |                  |      |  |  |  |  |  |  |  |
|-----|------------------|------|--|--|--|--|--|--|--|
| 110 | Document Control | 0.00 |  |  |  |  |  |  |  |
|-----|------------------|------|--|--|--|--|--|--|--|

**\*110\***

DC

Memo

0.02

Doc.Control -USB or Paperwork

Photocopy bluefile and create labels as per PPP D119-796-241 Chg 005

|     |          |      |  |  |  |  |  |  |  |
|-----|----------|------|--|--|--|--|--|--|--|
| 120 | Pick Kit | 0.00 |  |  |  |  |  |  |  |
|-----|----------|------|--|--|--|--|--|--|--|

**\*120\***

Packaging

Packaging

Memo

0.02

Packaging

|     |  |      |  |  |  |  |  |  |  |
|-----|--|------|--|--|--|--|--|--|--|
| 130 |  | 0.94 |  |  |  |  |  |  |  |
|-----|--|------|--|--|--|--|--|--|--|

**\*130\***

CNC Bend 2

BENDING MACHINE - CROSSTUBES

Memo

1.41

CNC Alpha 160 Bender

Bend tube as per Dwg D119-796-241 using CNC bender program





DQA: \_\_\_\_\_ Date: \_\_\_\_\_



# WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                             |                                                                                                                                                                                               |                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                                 |                                   |                                              |                                 |                                        |                                             |                                   |                                       |                                                |                                    |                                |                                               |                                        |                                   |                                 |                                               |                               |                                         |                                       |                                   |                                                 |                                                            |                                             |                                            |                                   |                                          |                                |                                        |                                          |                                     |                                             |                                           |                                   |                                      |                                  |                                  |                                           |                                  |                                     |                                        |                                     |                                 |                              |                                              |                                             |                                                          |                                       |                                  |                                     |                                              |                                        |                                      |                                                |                                           |                                           |                                                |         |  |  |  |
|--------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------|-----------------------------------|----------------------------------------------|---------------------------------|----------------------------------------|---------------------------------------------|-----------------------------------|---------------------------------------|------------------------------------------------|------------------------------------|--------------------------------|-----------------------------------------------|----------------------------------------|-----------------------------------|---------------------------------|-----------------------------------------------|-------------------------------|-----------------------------------------|---------------------------------------|-----------------------------------|-------------------------------------------------|------------------------------------------------------------|---------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------|--------------------------------|----------------------------------------|------------------------------------------|-------------------------------------|---------------------------------------------|-------------------------------------------|-----------------------------------|--------------------------------------|----------------------------------|----------------------------------|-------------------------------------------|----------------------------------|-------------------------------------|----------------------------------------|-------------------------------------|---------------------------------|------------------------------|----------------------------------------------|---------------------------------------------|----------------------------------------------------------|---------------------------------------|----------------------------------|-------------------------------------|----------------------------------------------|----------------------------------------|--------------------------------------|------------------------------------------------|-------------------------------------------|-------------------------------------------|------------------------------------------------|---------|--|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |                                             | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input checked="" type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> |                                           | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input checked="" type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                                           |                                 |                                   |                                              |                                 |                                        |                                             |                                   |                                       |                                                |                                    |                                |                                               |                                        |                                   |                                 |                                               |                               |                                         |                                       |                                   |                                                 |                                                            |                                             |                                            |                                   |                                          |                                |                                        |                                          |                                     |                                             |                                           |                                   |                                      |                                  |                                  |                                           |                                  |                                     |                                        |                                     |                                 |                              |                                              |                                             |                                                          |                                       |                                  |                                     |                                              |                                        |                                      |                                                |                                           |                                           |                                                |         |  |  |  |
| Date : 17/11/14                                              |                                             | Step #: 130                                                                                                                                                                                   |                                           | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                                 | MRB (QSI042) Approval             |                                              |                                 |                                        |                                             |                                   |                                       |                                                |                                    |                                |                                               |                                        |                                   |                                 |                                               |                               |                                         |                                       |                                   |                                                 |                                                            |                                             |                                            |                                   |                                          |                                |                                        |                                          |                                     |                                             |                                           |                                   |                                      |                                  |                                  |                                           |                                  |                                     |                                        |                                     |                                 |                              |                                              |                                             |                                                          |                                       |                                  |                                     |                                              |                                        |                                      |                                                |                                           |                                           |                                                |         |  |  |  |
| Description Work Order Deviation                             |                                             |                                                                                                                                                                                               |                                           | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                           |                                 |                                   | Completed By                                 |                                 |                                        |                                             |                                   |                                       |                                                |                                    |                                |                                               |                                        |                                   |                                 |                                               |                               |                                         |                                       |                                   |                                                 |                                                            |                                             |                                            |                                   |                                          |                                |                                        |                                          |                                     |                                             |                                           |                                   |                                      |                                  |                                  |                                           |                                  |                                     |                                        |                                     |                                 |                              |                                              |                                             |                                                          |                                       |                                  |                                     |                                              |                                        |                                      |                                                |                                           |                                           |                                                |         |  |  |  |
| Tube is bent narrow on one side.                             |                                             |                                                                                                                                                                                               |                                           | SCRAP. Too narrow and difference side-to-side too large.<br><br>9/17/0/14                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                           |                                 |                                   |                                              |                                 |                                        |                                             |                                   |                                       |                                                |                                    |                                |                                               |                                        |                                   |                                 |                                               |                               |                                         |                                       |                                   |                                                 |                                                            |                                             |                                            |                                   |                                          |                                |                                        |                                          |                                     |                                             |                                           |                                   |                                      |                                  |                                  |                                           |                                  |                                     |                                        |                                     |                                 |                              |                                              |                                             |                                                          |                                       |                                  |                                     |                                              |                                        |                                      |                                                |                                           |                                           |                                                |         |  |  |  |
|                                                              |                                             |                                                                                                                                                                                               |                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                                 |                                   | Lead hand / Supervisor Approval Verification |                                 |                                        |                                             |                                   |                                       |                                                |                                    |                                |                                               |                                        |                                   |                                 |                                               |                               |                                         |                                       |                                   |                                                 |                                                            |                                             |                                            |                                   |                                          |                                |                                        |                                          |                                     |                                             |                                           |                                   |                                      |                                  |                                  |                                           |                                  |                                     |                                        |                                     |                                 |                              |                                              |                                             |                                                          |                                       |                                  |                                     |                                              |                                        |                                      |                                                |                                           |                                           |                                                |         |  |  |  |
|                                                              |                                             |                                                                                                                                                                                               |                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                                 |                                   | QC / QA Coordinator Approval                 |                                 |                                        |                                             |                                   |                                       |                                                |                                    |                                |                                               |                                        |                                   |                                 |                                               |                               |                                         |                                       |                                   |                                                 |                                                            |                                             |                                            |                                   |                                          |                                |                                        |                                          |                                     |                                             |                                           |                                   |                                      |                                  |                                  |                                           |                                  |                                     |                                        |                                     |                                 |                              |                                              |                                             |                                                          |                                       |                                  |                                     |                                              |                                        |                                      |                                                |                                           |                                           |                                                |         |  |  |  |
| Root Cause                                                   |                                             | FAULT CATEGORY                                                                                                                                                                                |                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                                 |                                   |                                              |                                 |                                        |                                             |                                   |                                       |                                                |                                    |                                |                                               |                                        |                                   |                                 |                                               |                               |                                         |                                       |                                   |                                                 |                                                            |                                             |                                            |                                   |                                          |                                |                                        |                                          |                                     |                                             |                                           |                                   |                                      |                                  |                                  |                                           |                                  |                                     |                                        |                                     |                                 |                              |                                              |                                             |                                                          |                                       |                                  |                                     |                                              |                                        |                                      |                                                |                                           |                                           |                                                |         |  |  |  |
| Environment <input type="checkbox"/>                         | No Re-verification <input type="checkbox"/> | Pressure/Forced <input type="checkbox"/>                                                                                                                                                      | Temperature/Cure <input type="checkbox"/> | Power Loss/Surge <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Positioned Wrong <input type="checkbox"/> | Design <input type="checkbox"/> | Operator <input type="checkbox"/> | Bending <input type="checkbox"/>             | Set-up <input type="checkbox"/> | Folio/Program <input type="checkbox"/> | Outside Dimensions <input type="checkbox"/> | Doc/Data <input type="checkbox"/> | Offset/Setup <input type="checkbox"/> | Centre Not Concentric <input type="checkbox"/> | BOM/Route <input type="checkbox"/> | Grain <input type="checkbox"/> | Over/Under tolerance <input type="checkbox"/> | Equip/Tooling <input type="checkbox"/> | Supplier <input type="checkbox"/> | Cracks <input type="checkbox"/> | Broken/Damage/Defect <input type="checkbox"/> | Weld <input type="checkbox"/> | Part Incorrect <input type="checkbox"/> | Handling/Pre <input type="checkbox"/> | Training <input type="checkbox"/> | Crimp/Kink/Ripple/Wave <input type="checkbox"/> | Inspection Incomplete/Unqualified <input type="checkbox"/> | Wrong Stock Pulled <input type="checkbox"/> | Part Lost/Missing <input type="checkbox"/> | Material <input type="checkbox"/> | Use for Testing <input type="checkbox"/> | Cuffs <input type="checkbox"/> | Contamination <input type="checkbox"/> | Out of Sequence <input type="checkbox"/> | Part Moved <input type="checkbox"/> | Internal Transport <input type="checkbox"/> | Poor Information <input type="checkbox"/> | Crushing <input type="checkbox"/> | Countersink <input type="checkbox"/> | Off-set <input type="checkbox"/> | Drawing <input type="checkbox"/> | Tribal Knowledge <input type="checkbox"/> | Rushing <input type="checkbox"/> | Heat Treat <input type="checkbox"/> | Cut Too Short <input type="checkbox"/> | Mislabeled <input type="checkbox"/> | Finish <input type="checkbox"/> | LOA <input type="checkbox"/> | Product Improvement <input type="checkbox"/> | Wave/Twist in Tube <input type="checkbox"/> | Instructions Incomplete/Unclear <input type="checkbox"/> | Fit/Function <input type="checkbox"/> | Misread <input type="checkbox"/> | Substation <input type="checkbox"/> | Process Improvement <input type="checkbox"/> | Marks/Chatter <input type="checkbox"/> | Drill Holes <input type="checkbox"/> | Misaligned/off center <input type="checkbox"/> | Turning Sequence <input type="checkbox"/> | Past Expiry Date <input type="checkbox"/> | Manufacturing Process <input type="checkbox"/> | OTHER : |  |  |  |
| Misidentified <input type="checkbox"/>                       | Past Due <input type="checkbox"/>           |                                                                                                                                                                                               |                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                                 |                                   |                                              |                                 |                                        |                                             |                                   |                                       |                                                |                                    |                                |                                               |                                        |                                   |                                 |                                               |                               |                                         |                                       |                                   |                                                 |                                                            |                                             |                                            |                                   |                                          |                                |                                        |                                          |                                     |                                             |                                           |                                   |                                      |                                  |                                  |                                           |                                  |                                     |                                        |                                     |                                 |                              |                                              |                                             |                                                          |                                       |                                  |                                     |                                              |                                        |                                      |                                                |                                           |                                           |                                                |         |  |  |  |

**Work Order ID 164349**

Wednesday, July 19, 2017 11:10:38 AM

**\*164349\***

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Item ID: D119-796-241

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                                 | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|----------------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 140                            | QC15- Crosstube Dimensional Check                        | 0.00                 |         |        |              |               |               |                  |                |
| <b>*140*</b>                   |                                                          |                      |         |        |              |               |               |                  |                |
| QC                             | Memo                                                     | 0.02                 |         |        |              |               |               |                  |                |
| Quality Control                |                                                          |                      |         |        |              |               |               |                  |                |
| 145                            |                                                          | 0.00                 |         |        |              |               |               |                  |                |
| <b>*145*</b>                   |                                                          |                      |         |        |              |               |               |                  |                |
| Crosstubes                     | Memo                                                     | 2.82                 |         |        |              |               |               |                  |                |
| Crosstubes                     | 1- CUT TUBE AT HEIGHT ON FAI SHEET                       |                      |         |        |              |               |               |                  |                |
|                                | 2- VERFY HEIGHT: _____<br>BY QC15 LEVEL INSPECTOR: _____ |                      |         |        |              |               |               |                  |                |
|                                | 3- DEBURR CUT SURFACE                                    |                      |         |        |              |               |               |                  |                |



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**\*164349\***

Page 3

Item ID: D119-796-241

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

150

0.52

**\*150\***

Crosstubes

Crosstubes

Memo

1.63

Crosstubes

\*\*\*\*\* ENSURE PROPER JIG POSITIONING \*\*\*\*\*

1-DRILL TUBE AS PER DWG USING DT10087

2- DRILL RIVET HOLES USING DT8787 FWD

3- DEBURR AND C'SINK RIVET HOLES AS PER DWG

4- FLIP TUBE, REPEAT STEP 2 AND 3

5- SCRIBE PART# AND BATCH# USING VIBRATING STYLUS ON INSIDE  
OF CUFF AS PER DWG D119-796-141

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Item ID: D119-796-241

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start

**\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop

**\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

160

Crosstubes Chemical Conversion

0.00

**\*160\***

HandFXtube

Memo

1.69

Hand Finishing Crosstubes

1- INSPECT AND REMOVE ALL MARKS FROM TUBE WITHIN LIMITS  
ON DWG D119-796-141

\*\*\*IMMEDIATELY AFTER GRINDING\*\*\*

2- PRESSURE WASH X-TUBE INSIDE AND OUT

3- ALODINE AND ACID ETCH X-TUBE INSIDE AND OUT AS PER QSI005.

4- Verify grinding marks By: \_\_\_\_\_

170

QC7-Inspect Chemical Conversion Coat

0.00

**\*170\***

QC

Memo

0.02

Quality Control



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Item ID: D119-796-241

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                                        | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|-----------------------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 180                            | Outsource process - NDT per QSI038 4.1                          | 0.00                 |         |        |              |               |               |                  |                |
| <b>*180*</b>                   |                                                                 |                      |         |        |              |               |               |                  |                |
| Outsource2                     | <b>Memo</b>                                                     | 0.00                 |         |        |              |               |               |                  |                |
| Outsource process - NDT        | *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***                |                      |         |        |              |               |               |                  |                |
|                                | Liquid Penetrant Inspection as per QSI 038Or                    |                      |         |        |              |               |               |                  |                |
|                                | Issue P/O: _____ LPI as per ASTM 1417                           |                      |         |        |              |               |               |                  |                |
|                                | Level 2 Attach copy of NDT results to work order                |                      |         |        |              |               |               |                  |                |
| 190                            | Receive & Inspect for Damage & Mat'l Certs                      | 0.00                 |         |        |              |               |               |                  |                |
| <b>*190*</b>                   | Packaging                                                       |                      |         |        |              |               |               |                  |                |
| Packaging                      | <b>Memo</b>                                                     | 0.02                 |         |        |              |               |               |                  |                |
| Packaging                      | Ensure copy of NDT results attached to work order.              |                      |         |        |              |               |               |                  |                |
| 200                            | QC5- Inspect part completeness to step on W/O                   | 0.00                 |         |        |              |               |               |                  |                |
| <b>*200*</b>                   |                                                                 |                      |         |        |              |               |               |                  |                |
| QC                             | <b>Memo</b>                                                     | 0.02                 |         |        |              |               |               |                  |                |
| Quality Control                | *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***                |                      |         |        |              |               |               |                  |                |
|                                | Inspect for damage & ensure results are as per Dwg D119-796-241 |                      |         |        |              |               |               |                  |                |

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Item ID: D119-796-241 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: AFT Crosstube Installation without Step (no hardware)  
Start Date: 7/20/2017 Start Qty: 1.00 **\*1\*** Cust Item ID:  
Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\*** Customer:  
Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

230

**\*230\***

SprayPaint

Spray Painting

Spray Painting per QSI005 4.2  
SprayPaint

0.00

1.36

**Memo**

\*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O

\*\*\*VERIFY BY \_\_\_\_\_ PART # TO MATCH  
W/O \_\_\_\_\_

\*\*\*MASK SCRIBE B# &amp; P# AND VERIFY\*\*\*

1- Prime Inside of tube.

2- Install nut plates as per dwg (D2873-043)

3- Mask cuffs, (grounding clamp DT10319) and all other location as per note#2,  
sheet 4.

4- Prime exterior of tube per QSI005.

Primer Batch: \_\_\_\_\_

Start Time: \_\_\_\_\_

Finish Time: \_\_\_\_\_

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Item ID: D119-796-241

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

240

QC14- Inspect Spray Paint

0.00

**\*240\***

QC

0.00

Quality Control

Memo

\*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O

\*\*\*VERIFY BY \_\_\_\_\_ PART # TO MATCH  
W/O \_\_\_\_\_



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Item ID: D119-796-241

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

242

0.00

**\*242\***

1.58

Crosstubes

**Memo**

Assemble as per dwg D119-796-241 and QSI

1- Abrade mating surfaces with Scotch Brite 7447 and clean with Dupont 4105s or equivalent as per dwg.

2- Install D5152-043 with proseal 890 on concave surface, 0.100" MIN thick as per dwg using DT10112 (identified right and left)

\*\*\*\*MAINTAIN CLAMPING PRESSURE ON FOR MIN 72HRS\*\*\*\*

Proseal Batch: \_\_\_\_\_

EXP: \_\_\_\_\_

PROSEAL CURE TIME 72 HOURS:

Start: \_\_\_\_\_

Finish: \_\_\_\_\_

3- USE DT10304 PINS TO LOCATE SUPPORTS. Install center support without bonbing.

4- USE DT10304 PINS TO LOCATE SUPPORTS. Install Damper support and contact pads using proseal 890 per dwg and clamp in position.

Proseal Batch: \_\_\_\_\_

EXP: \_\_\_\_\_

PROSEAL CURE TIME 72 HOURS:

Start: \_\_\_\_\_

Finish: \_\_\_\_\_

**Work Order ID 164349**

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**\*164349\***

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**Item ID:** D119-796-241**Accept****\*N900040100\*****Setup Start \*NS1\*****Revision ID:****Stop \*NS2\*****Item Name:** AFT Crosstube Installation without Step (no hardware)**Start Date:** 7/20/2017 **Start Qty:** 1.00 **\*1\*****Cust Item ID:****Required Date:** 8/17/2017 **Req'd Qty:** 1.00 **\*1\*****Customer:****Reference:****Approvals:** **Process Plan:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Tooling:** \_\_\_\_\_ **Date:** \_\_\_\_\_**Run Start \*NR1\*****QC:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **SPC (Y/N):** \_\_\_\_\_ **Date:** \_\_\_\_\_**Stop \*NR2\*****Sequence ID/  
Work Center ID****Operation  
Description****Set Up/  
Run Hours****Tool ID****Tool #****Plan  
Code****Accept  
Qty****Reject  
Qty****Reject  
Number****Insp.  
Stamp**

244

QC5- Inspect part completeness to step on W/O

0.00

**\*244\***

QC

Quality Control

**Memo**

0.02

\*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O

\*\*\*VERIFY BY \_\_\_\_\_ PART # TO MATCH  
W/O \_\_\_\_\_

**Work Order ID 164349**

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Item ID: D119-796-241

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

246

Spray Painting per QSI005 4.2

0.00

**\*246\***

SprayPaint

Memo

0.43

Spray Painting

\*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O

\*\*\*VERIFY BY \_\_\_\_\_ PART # TO MATCH  
W/O \_\_\_\_\_

\*\*\*MASK SCRIBE B# &amp; P# AND VERIFY\*\*\*

1- Remove all non-fixed hardware and clean any excess proseal.

2- Scuff tube with Scotch Brite 7447.

3- Mask cuff and all other location as per note#2.

4- Prime as per dwg and QSI005

Primer Batch: \_\_\_\_\_

Start Time: \_\_\_\_\_

Finish Time: \_\_\_\_\_

5- Apply matte clear as per dwg and QSI005

Clear Batch: \_\_\_\_\_

Start Time: \_\_\_\_\_

Finish Time: \_\_\_\_\_



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Item ID: D119-796-241

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

248

Spray Painting per QSI005 4.2

0.00

**\*248\***

SprayPaint

Spray Painting

**Memo**

0.60

\*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O

\*\*\*VERIFY BY \_\_\_\_\_ PART # TO MATCH  
W/O \_\_\_\_\_

\*\*\*MASK SCRIBE B# &amp; P# AND VERIFY\*\*\*

1- Mask underside of tube as per dwg. Mask cuff and all other location as per  
note#2.

2- Scuff tube with Scotch Brite 7447

3- Paint outside of crosstube

Paint Batch: \_\_\_\_\_

Start Time: \_\_\_\_\_

Finish Time: \_\_\_\_\_

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Item ID: D119-796-241

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run Start

**\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

250

QC14- Inspect Spray Paint  
Crosstubes

0.00

**\*250\***

QC

Memo

0.02

Quality Control

\*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O

\*\*\*VERIFY BY \_\_\_\_\_ PART # TO MATCH  
W/O \_\_\_\_\_

252

0.00

**\*252\***

Crosstubes

Memo

1.00

Crosstubes

1- Re-install non fixed hardware per dwg

\*\*\*Torque clamps on damper and contact pad to 80-100 IN-LBS.\*\*\*

2- Apply a file-seal of proseal 890 around damper supports and contact pads.

Allow proseal to dry before inspecting.

Proseal 890

Batch: \_\_\_\_\_

EXP: \_\_\_\_\_

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Item ID: D119-796-241

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run Start

**\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

260

QC5- Inspect part completeness to step on W/O

0.00

**\*260\***

QC

Memo

0.02

Quality Control

\*\*\*RE-CHECK TORCQUE ON CLAMP AFTER PROSEAL HAS CURED AS  
PER DWG.\*\*\*

1- ATTACH A RED TAG TO CENTER SUPPORT THAT READS

"CENTER SUPPORT NOT FIXED"

THEN DATE AND STAMP IT.

\*\*\*VERIFY BY \_\_\_\_\_ BATCH # TO MATCH W/O

\*\*\*VERIFY BY \_\_\_\_\_ PART # TO MATCH  
W/O \_\_\_\_\_

270

Pick Kit

0.00

**\*270\***

Packaging

Memo

0.00

Packaging



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**\*164349\***

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Item ID: D119-796-241

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 8/17/2017 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run

Start

**\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

280

QC4- 100% Inspect kits for completeness

0.00

**\*280\***

QC

Memo

0.00

Quality Control

290

Identify as per dwg &amp; Stock Location: \_\_\_\_\_

0.00

**\*290\***

Packaging

Packaging

Memo

0.20

Packaging

Identify and pack for shipping as per PPP D119-796-241

300

QC21- Final Inspection - Work Order Release

0.00

**\*300\***

QC

Memo

0.10

Quality Control

# Picklist Print

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Page 1

Work Order ID: 164349

**\*164349\***

Parent Item: D119-796-241

**\*D119-796-241\***

Parent Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017

Required Date: 8/17/2017

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A 14.09.03 NEW ISSUE DD VERF:JLM IPP  
REV:B 14.10.15 AS PER REV.B DD VERF:JLM IPP REV:C  
14.11.19 AS PER REV.C DD VERF:JLM IPP REV:D 14.12.12  
AS PER REV.pd1 DD VERF:JLM IPP REV:E 15.02.11 AS PER  
REV F JLM VERIFIED BY:DD IPP REV:F 17.05.08 AS PER IIN  
REV.F DD VERF:JFS

| Component Item ID/<br>Item Name                    | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item     | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|----------------------------------------------------|------------------------|---------------|-----------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| AN174-3A<br><b>*AN174-3A*</b><br>BOLT              |                        | Purchased     | No              |                     |                  | 270             | Each               | 42.0000        | 2           | 2            |               |                |        |
| **                                                 |                        |               |                 |                     |                  |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | <u>Location</u> |                     | <u>Loc Qty</u>   |                 | <u>Loc Code</u>    |                |             |              |               |                |        |
|                                                    |                        |               | ST332           |                     | 42               |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | M132540         |                     | 18               |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | M137963         |                     | 24               |                 |                    |                |             |              |               |                |        |
| MS21042-4<br><b>*MS21042-4*</b><br>Nut             | MS21042L4              | Purchased     | No              |                     |                  | 270             | Each               | 2.0000         | 2           | 2            |               |                |        |
| **                                                 |                        |               |                 |                     |                  |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | <u>Location</u> |                     | <u>Loc Qty</u>   |                 | <u>Loc Code</u>    |                |             |              |               |                |        |
|                                                    |                        |               | ST304           |                     | 2                |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | 9063            |                     | 2                |                 |                    |                |             |              |               |                |        |
| NAS1149D0432J<br><b>*NAS1149D0432.J*</b><br>WASHER |                        | Purchased     | No              |                     |                  | 270             | Each               | 1,011.000      | 4           | 4            |               |                |        |
| **                                                 |                        |               |                 |                     |                  |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | <u>Location</u> |                     | <u>Loc Qty</u>   |                 | <u>Loc Code</u>    |                |             |              |               |                |        |
|                                                    |                        |               | GA              |                     | 24               |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | m131026         |                     | 24               |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | ST264           |                     | 987              |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | m134676         |                     | 30               |                 |                    |                |             |              |               |                |        |
|                                                    |                        |               | m137459         |                     | 957              |                 |                    |                |             |              |               |                |        |

# Picklist Print

Wednesday, July 19, 2017 11:10:41 AM

Page 2

Work Order ID: 164349

**\*164349\***

Parent Item: D119-796-241

**\*D119-796-241\***

Parent Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017

Required Date: 8/17/2017

Start Qty: 1.00

Required Qty: 1.00

D119-796-241TRN

Manufactured No

130

Each

6.0000

1

1

**\*D119-796-241TRN\***

**\*\***

Crosstube Turning Detail

Location

Loc Qty

Loc Code

LG014

6

162078

1

162079

1

162081

1

162082

1

162083

1

162084

1

D2873-043

Manufactured No

242

Each

117.0000

4

4

**\*D2873-043\***

**\*\***

Nut Plate Assembly

Location

Loc Qty

Loc Code

LG050

117

156196

2

161520

25

161580

50

162854

40

D5122-1

Manufactured No

252

Each

8.0000

1

1

**\*D5122-1\***

**\*\***

Center Support, Upper

Location

Loc Qty

Loc Code

LG053

8

154815

4

162550

4

# Picklist Print

Wednesday, July 19, 2017 11:10:42 AM

Page 3

Work Order ID: 164349

**\*164349\***

Parent Item: D119-796-241

**\*D119-796-241\***

Parent Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017

Required Date: 8/17/2017

Start Qty: 1.00

Required Qty: 1.00

D5123-1 Manufactured No 252 Each 372.0000 6 6

**\*D5123-1\***

Clamp Cushion

\*\*

Location

Loc Qty

Loc Code

LG054

372

153232

172

160081

200

D5123-5 Manufactured No 252 Each 54.0000 2 2

**\*D5123-5\***

Clamp Cushion

\*\*

Location

Loc Qty

Loc Code

LG054

54

153235

54

D5134-041 Manufactured No 252 Each 2.0000 1 1

**\*D5134-041\***

Damper Support Assembly, LH

\*\*

Location

Loc Qty

Loc Code

LG54

2

152415

2

D5134-042 Manufactured No 252 Each 1.0000 1 1

**\*D5134-042\***

Damper Support Assembly, RH

\*\*

Location

Loc Qty

Loc Code

LG054

1

154818

1



# Picklist Print

Wednesday, July 19, 2017 11:10:42 AM

Page 4

Work Order ID: 164349

**\*164349\***

Parent Item: D119-796-241

**\*D119-796-241\***

Parent Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017

Required Date: 8/17/2017

Start Qty: 1.00

Required Qty: 1.00

D5136-1      Manufactured      No      252      Each      13.0000      1      1

**\*D5136-1\***

Contact Pad, LH

**\*\***

Location

Loc Qty

Loc Code

LG055

13

156439

7

162860

6

D5136-2      Manufactured      No      252      Each      8.0000      1      1

**\*D5136-2\***

Contact Pad, RH

**\*\***

Location

Loc Qty

Loc Code

LG055

8

156504

8

D5152-043      Manufactured      No      252      Each      16.0000      2      2

**\*D5152-043\***

Aft Post Mount Assembly

**\*\***

Location

Loc Qty

Loc Code

LG055

16

162548

10

162878

4

163392

2

CR3212-4-07      Purchased      No      242      Each      303.0000      16      16

**\*CR3212-4-07\***

CHERRY RIVET

**\*\***

Location

Loc Qty

Loc Code

CCK003

200

m137851

100

m137951

100

LG056

103

m135978

103

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Shop Packet Print

Page 4

# Picklist Print

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Page 5

Work Order ID: 164349

**\*164349\***

Parent Item: D119-796-241

**\*D119-796-241\***

Parent Item Name: AFT Crosstube Installation without Step (no hardware)

Start Date: 7/20/2017

Required Date: 8/17/2017

Start Qty: 1.00

Required Qty: 1.00

MS21920-25

Purchased

No

252

Each

139.0000

6

6

**\*MS21920-25\***

Clamp

**\*\***

Location

Loc Qty

Loc Code

FG

4

120920

2

m134987

2

LG050

135

m136621

1

m136648

9

m137459

25

m137587

25

m137820

25

m137963

50

MS21920-28

Purchased

No

252

Each

84.0000

2

2

**\*MS21920-28\***

Clamp

**\*\***

Location

Loc Qty

Loc Code

FG

1

105884

1

LG050

79

M137075

4

M137361

25

M137508

25

M137963

25

LG051

1

M132169

1

LG057

2

M134130

2

st543

1

M136740

1

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Page 5

# Picklist Print

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Page 6

Work Order ID: 164349

Parent Item: D119-796-241

Parent Item Name: AFT Crosstube Installation without Step (no hardware)

**\*164349\***

**\*D119-796-241\***

Start Date: 7/20/2017

Required Date: 8/17/2017

Start Qty: 1.00

Required Qty: 1.00

D5515-1

Manufactured No

252

Each

12.0000

2

2

**\*D5515-1\***

Grounding Clamp

\*\*

Location

Loc Qty

Loc Code

ST517

12

160166

12

MS27039-1-08

Purchased

No

252

Each

273.0000

2

2

**\*MS27039-1-08\***

Screw

\*\*

Location

Loc Qty

Loc Code

FP001

63

m136047

3

m137361

60

GA

22

m128636

22

ST182

188

m137820

188

MS21042-3

MS21042L3

Purchased

No

252

Each

0.0000

2

2

**\*MS21042-3\***

Nut

NAS1149D0332J

Purchased

No

252

Each

1,203.000

4

4

**\*NAS1149D0332.J\***

Washer

\*\*

Location

Loc Qty

Loc Code

FP

157

m137075

157

GA

208

m136643

208

ST264

838

m137736

5

m137963

833

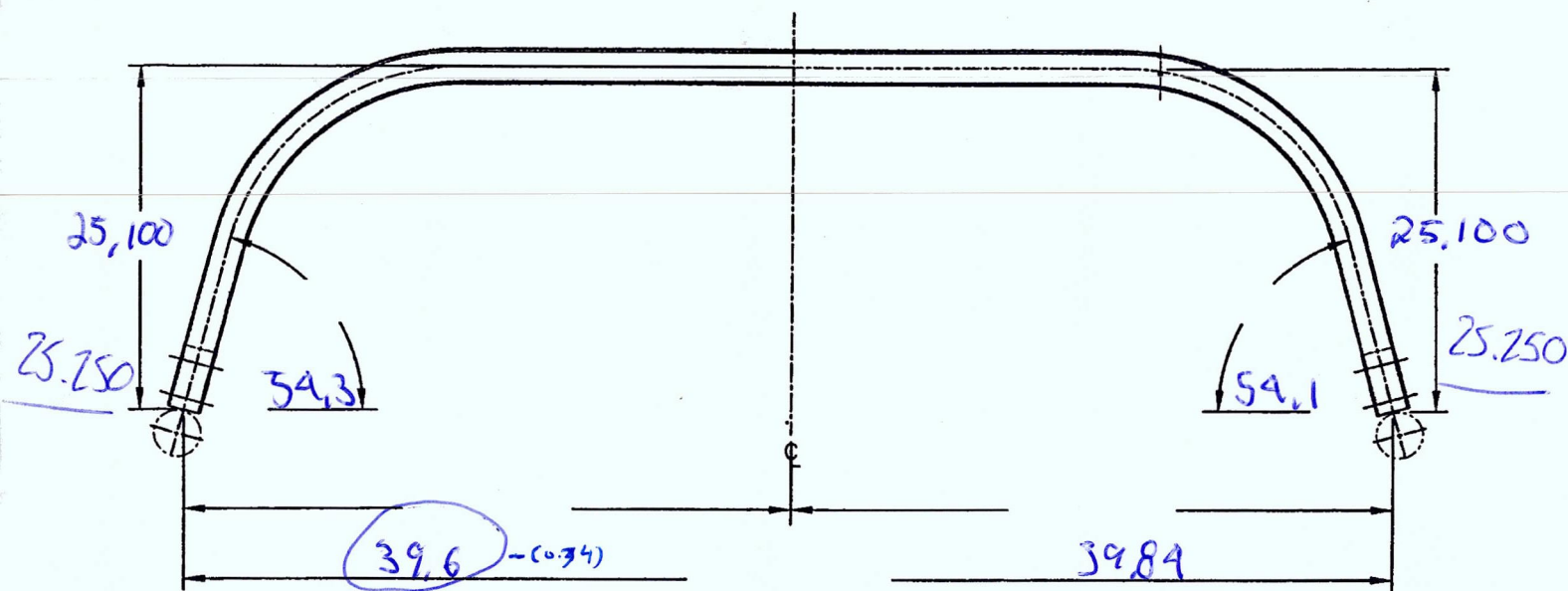
Wednesday, July 19, 2017 11:10:42 AM

Shop Packet Print

Page 6

|                                                   |  |                     |              |
|---------------------------------------------------|--|---------------------|--------------|
| <b>DART AEROSPACE LTD</b>                         |  | <b>Work Order:</b>  | 164344       |
| <b>Description:</b> Crosstube Aft, with Step      |  | <b>Part Number:</b> | D119-796-241 |
| <b>Inspection Dwg:</b> D119-796-241 <b>Rev:</b> J |  | <b>Page 1 of 1</b>  |              |

| Required Dimension | Min    | Max    |
|--------------------|--------|--------|
| Height             | 24.840 | 25.100 |
| 1/2 Span           | 39.810 | 40.070 |
| Angle              | 54°    | 57°    |
| Total Span         | 79.620 | 80.140 |
| Bending Passes     | 8      | --     |
| Crushing           | --     | 8.5%   |



|                | Side A | Side B |
|----------------|--------|--------|
| Bending Passes | 12     | 12     |
| Crushing       | 7.7%   | 7.7%   |
| Comments       |        |        |
|                |        |        |
|                |        |        |
|                |        |        |
|                |        |        |

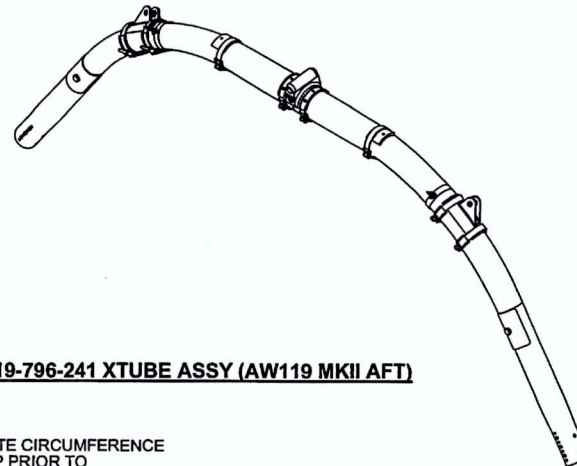
|                 |  |
|-----------------|--|
| QC15 Inspection |  |
| Date            |  |

| Rev | Date     | Change            | Revised by | Approved |
|-----|----------|-------------------|------------|----------|
| A   | 15.04.14 | New Issue         | KJ         |          |
| B   | 15.11.12 | Min angle revised | KJ         |          |
| C   | 15.12.15 | Dwg Rev updated   | KJ         |          |
| D   | 17.07.12 | Dwg Rev updated   | KJ         |          |



SHOP COPY  
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ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. 164349 M.C.S.  
170719

**D119-796-241 XTUBE ASSY (AW119 MKII AFT)**



**NOTES:**

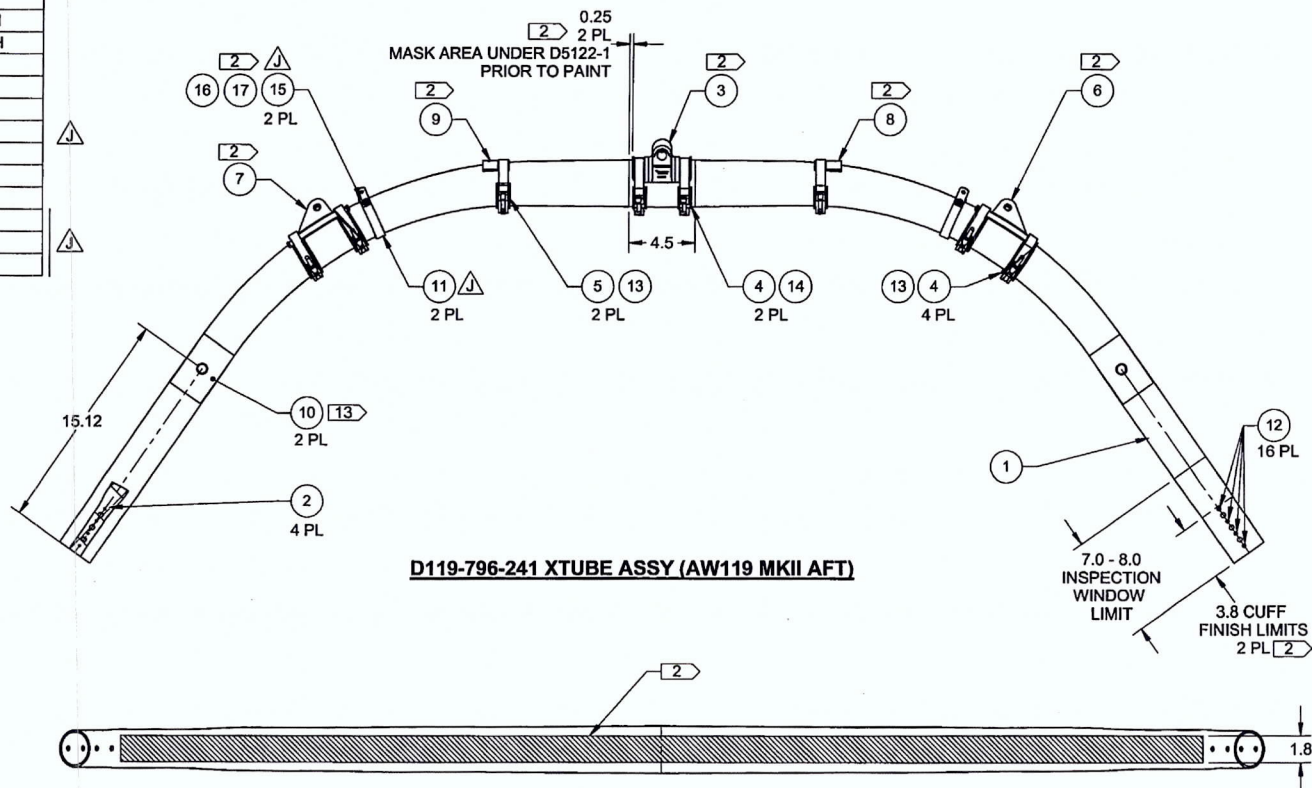
- 1) MATERIAL: N/A
- 2) FINISH: MASK D5134-041/-042 DAMPER SUPPORT ASSEMBLIES, CUFFS, D5136-1/-2 CONTACT PADS, THE COMPLETE CIRCUMFERENCE OF THE TUBE UNDER THE D5122-1 CENTER SUPPORT AND THE TAB ON THE D5515-1 GROUNDING CLAMP PRIOR TO APPLICATION OF CLEAR COAT/PAINT.  
IF NECESSARY TOUCH UP PRIMER ON OUTSIDE OF CROSSTUBE PER DART QSI 005 4.2.  
APPLY MATTE CLEAR COAT TO THE UNDERSIDE OF CROSSTUBE AS SHOWN (B4-2, HATCHED AREA) PER QSI 005 4.2.  
MASK THE UNDERSIDE OF CROSSTUBE AS SHOWN (B4-2, HATCHED AREA).  
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY USING PART NUMBER "D119-796-241" AND BATCH NUMBER ON INSIDE OF CUFF PER QSI 044 6.4
- 7) WEIGHT: 26.26 lbs
- 8) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE.  
THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM DEFECTS SUCH AS SCRATCHES, NICKS OR DENTS. DEFECTS UP TO 0.005 MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 9) INSTALL D5122-1 CENTER SUPPORT HAND TIGHT ONLY. DO NOT TORQUE. INSTALL RED TAG TO INDICATE "D5122-1 CENTER SUPPORT MUST BE BONDED PER IIN-D119-796 PRIOR TO FLIGHT".
- 10) PRIOR TO FINISHING, ABRASE MATING SURFACES OF D5136-1/-2 AND SURFACE OF CROSSTUBE WITH SCOTCH BRITE 7447 RED AND REMOVE RESIDUE WITH DUPONT 4105S WASH 'N' WIPE DEGREASER. APPLY A 0.100" MIN THK LAYER OF PROSEAL 890 ON THE INSIDE CONCAVE SURFACE OF THE D5136-1/-2 CONTACT PADS AND INSTALL AT AN 8.4" OFFSET FROM THE CROSSTUBE BENDING PLANE. INSTALL MS21920-25 CLAMPS AND D5123-5 CLAMP CUSHIONS WHILE WET. PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.
- 11) TORQUE MS21920 CLAMPS 80 - 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY, THE NUT HAS NOT BOTTOMED-OUT AFTER TORQUING AND THE NUT IS FACING AFT.
- 12) PRIOR TO FINISHING, POSITION AND INSTALL D5134-041/-042 DAMPER SUPPORTS USING JIG DT10085. ABRASE MATING SURFACES OF THE D5134-041/-042 DAMPER SUPPORTS AND CROSSTUBE WITH SCOTCH BRITE 7447 RED AND REMOVE RESIDUE WITH DUPONT 4105S WASH 'N' WIPE DEGREASER. APPLY A 0.100" MIN THK LAYER OF PROSEAL 890 ON THE INSIDE CONCAVE SURFACE OF THE D5134-041/-042. INSTALL MS21920-25 CLAMPS AND D5123-1 CLAMP CUSHIONS WHILE WET. PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS. ENSURE THAT THE MS21920 CLAMPS ARE POSITIONED AS SHOWN IN DETAIL C.
- 13) PRIOR TO FINISHING, ABRASE MATING SURFACES OF CROSSTUBE AND D5152-043 WITH SCOTCH BRITE 7447 RED AND REMOVE RESIDUE WITH DUPONT 4105S WASH 'N' WIPE DEGREASER. INSTALL D5152-043 WITH LAYER OF PROSEAL 890 ON INSIDE CONCAVE SURFACE, 0.100" MIN THK LOCATE D5152-043 USING TOOL DT10112.
- 14) INSTALL THE D5515-1 GROUNDING CLAMP AND ASSOCIATED HARDWARE PER DETAIL "C" PRIOR TO FINISHING. TORQUE THE MS21042-3 NUT 12-15 IN-LB. COMPLETELY SEAL THE EDGES OF THE CLAMP USING PROSEAL 890.
- 15) CARRY OUT A RESISTANCE CHECK BETWEEN THE D5515-1 GROUNDING CLAMP AND ANY UNPAINTED SECTION OF THE CROSSTUBE IN ACCORDANCE WITH AC43-13-1B CHAPTER 11. MAXIMUM RESISTANCE IS 3 MEGOHMS.

RELEASED  
2017-05-04  
ECN 17-536

|            |                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                          |              |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| J          | ADD NOTE 14 & 15 ON SHT 1. ADD PAINT/PRIMER MASKING LOCATIONS. REVISE NOTES ON SHT 1 & 4. REVISE BOM ON SHT 2 TO ADD GROUNDING CLAMP AND ASSOCIATED HARDWARE. REF PAR 17-580                                                                                    | ML                                                                                                                                                                                                                                                                       | 17.02.10     |
| I          | D6023-106 MATERIAL REPLACES D6009-106. D5136-1/-2 & D5134-041/-042 NOW INSTALLED ON PRIMER.                                                                                                                                                                     | AP                                                                                                                                                                                                                                                                       | 15.10.13     |
| H          | NOTE 9 RE-WITTEN. BONDING INSTRUCTIONS MOVED TO IIN. SEE PREVIOUS REV FOR DETAILS.                                                                                                                                                                              | AP                                                                                                                                                                                                                                                                       | 15.07.02     |
| G          | FINISHING ORDER ADJUSTED. UPDATE BEND TOLERANCE AND TRN DETAIL TOLERANCE TO MATCH D119-796-141 DWG                                                                                                                                                              | AP                                                                                                                                                                                                                                                                       | 15.04.24     |
| F          | REMOVED PRIMER/PAINT ON CUFFS, 2.516 WAS 2.500 (C8-5)                                                                                                                                                                                                           | AP                                                                                                                                                                                                                                                                       | 15.02.03     |
| E          | D5152-043 WAS D5150-3, SCOTCH BRITE 7447 RED WAS 180 GRIT SANDPAPER                                                                                                                                                                                             | DB                                                                                                                                                                                                                                                                       | 15.01.15     |
| D          | ADD D5150-3 STEP POST (2X), MOVED INSPECTION WINDOW DETAIL TO SHT 1, MODIFIED NOTES ON SH 1 & 3                                                                                                                                                                 | DB                                                                                                                                                                                                                                                                       | 14.11.25     |
| C          | CR3212-4-07 RIVETS WAS CR3212-4-05 RIVETS, RADIUS BLOCK WAS NUT PLATE ASSEMBLY (BOM), REMOVED 7.5 DEG CUFF HOLE OFFSET (A1-3), REDUCED CUFF DIA TO 2.500 (C8-5), ADD INSPECTION WINDOW                                                                          | AP                                                                                                                                                                                                                                                                       | 14.10.23     |
| B          | ORIENTATION OF D5122-1 CENTER SUPPORT WAS CORRECTED. D5123-5 ADDED UNDER D5136-1/-2 CONTACT PADS. ADDED D2873-043 NUT PLATE ASSY & CR3212-4-05 RIVETS. ADDED REFERENCE TO SKIDTUBES FOR LOCATING CUFF HOLES. RE-ORGANIZED NOTES, REMOVED REDUNDANT INFORMATION. | AP                                                                                                                                                                                                                                                                       | 14.09.08     |
| A          | NEW ISSUE                                                                                                                                                                                                                                                       | AP                                                                                                                                                                                                                                                                       | 14.08.07     |
| REV.       | DESCRIPTION                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                          | BY DATE      |
| DESIGN     | AP                                                                                                                                                                                                                                                              | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                 |              |
| DRAWN      | ML                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                          |              |
| CHECKED    | JMH                                                                                                                                                                                                                                                             | DRAWING NO.                                                                                                                                                                                                                                                              | REV. J       |
| MFG. APPR. | DP                                                                                                                                                                                                                                                              | D119-796-241                                                                                                                                                                                                                                                             | SHEET 1 OF 7 |
| APPROVED   | WM                                                                                                                                                                                                                                                              | TITLE                                                                                                                                                                                                                                                                    | SCALE        |
| DE APPR.   | DS                                                                                                                                                                                                                                                              | XTUBE ASSY (AW119 MKII AFT)                                                                                                                                                                                                                                              | NTS          |
| DATE       | 17.02.10                                                                                                                                                                                                                                                        | COPYRIGHT © 2014 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |

APPROVED

| ITEM | QTY | P/N             | DESCRIPTION                 |
|------|-----|-----------------|-----------------------------|
|      | X   | D119-796-241    | XTUBE ASSY (AW119 MKII AFT) |
| 1    | 1   | D119-796-241BND | CROSSTUBE, AFT              |
| 2    | 4   | D2873-043       | RADIUS BLOCK                |
| 3    | 1   | D5122-1         | CENTER SUPPORT              |
| 4    | 6   | D5123-1         | CLAMP CUSHION               |
| 5    | 2   | D5123-5         | CLAMP CUSHION               |
| 6    | 1   | D5134-041       | DAMPER SUPPORT ASSY, LH     |
| 7    | 1   | D5134-042       | DAMPER SUPPORT ASSY, RH     |
| 8    | 1   | D5136-1         | CONTACT PAD, LH             |
| 9    | 1   | D5136-2         | CONTACT PAD, RH             |
| 10   | 2   | D5152-043       | AFT POST MOUNT ASSY         |
| 11   | 2   | D5515-1         | GROUNDING CLAMP             |
| 12   | 16  | CR3212-4-07     | CSK RIVET, CHERRY MAX       |
| 13   | 6   | MS21920-25      | CLAMP                       |
| 14   | 2   | MS21920-28      | CLAMP                       |
| 15   | 2   | MS27039-1-08    | SCREW, PAN-HEAD             |
| 16   | 2   | MS21042-3       | NUT                         |
| 17   | 4   | NAS1149D0332J   | WASHER                      |

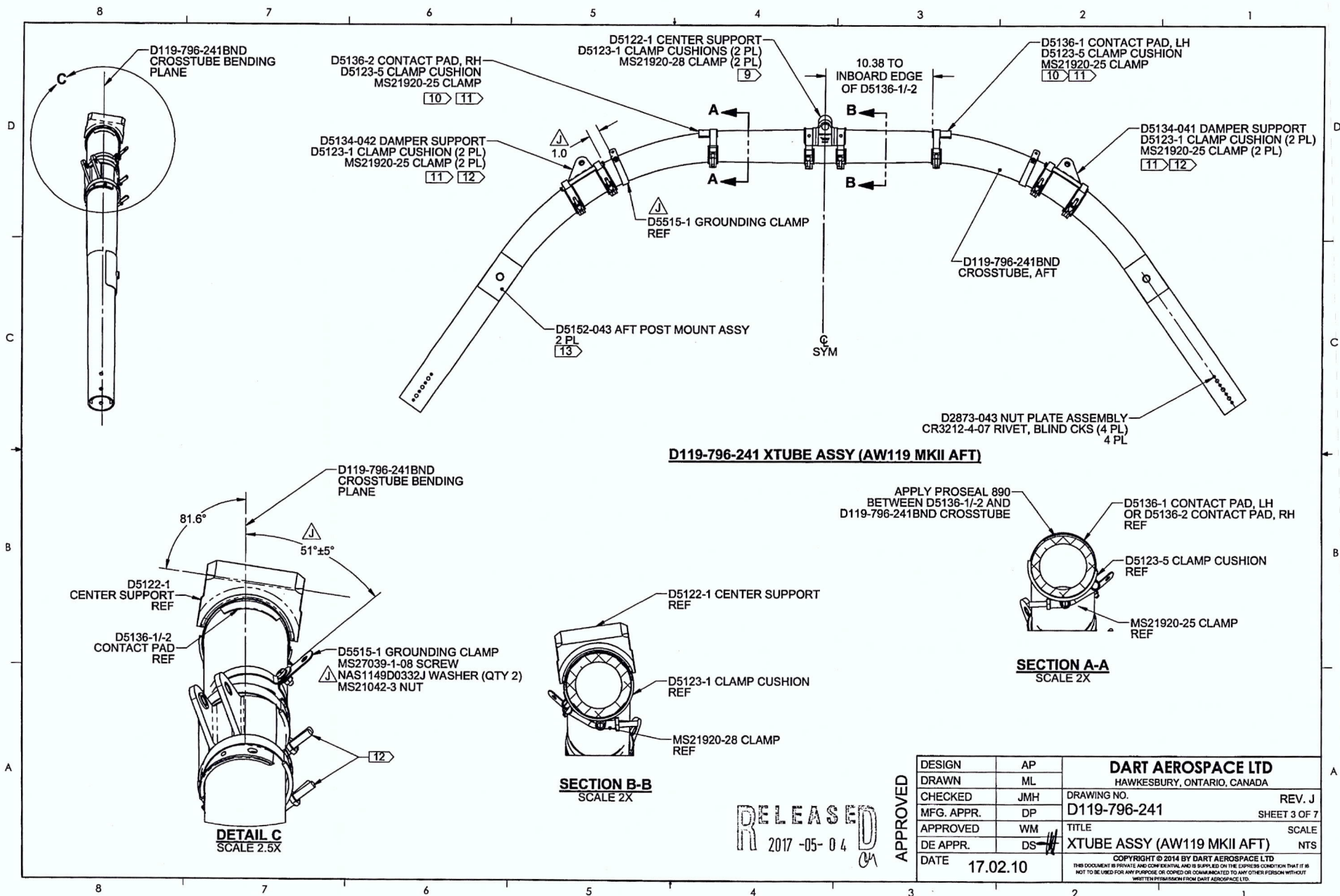


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2017-05-04

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|                                                                                                                                                                                                                               |          |                                        |              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------|--------------|
| DESIGN                                                                                                                                                                                                                        | AP       | <b>DART AEROSPACE LTD</b>              |              |
| DRAWN                                                                                                                                                                                                                         | ML       | HAWKESBURY, ONTARIO, CANADA            |              |
| CHECKED                                                                                                                                                                                                                       | JMH      | DRAWING NO.                            | REV. J       |
| MFG. APPR.                                                                                                                                                                                                                    | DP       | D119-796-241                           | SHEET 2 OF 7 |
| APPROVED                                                                                                                                                                                                                      | WM       | TITLE                                  | SCALE        |
| DE APPR.                                                                                                                                                                                                                      | DS       | XTUBE ASSY (AW119 MKII AFT)            | NTS          |
| DATE                                                                                                                                                                                                                          | 17.02.10 | COPYRIGHT © 2014 BY DART AEROSPACE LTD |              |
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|            |          |                                                                                                                                                                                                                                                                          |              |
|------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     | AP       | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                |              |
| DRAWN      | ML       | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                              |              |
| CHECKED    | JMH      | DRAWING NO.                                                                                                                                                                                                                                                              | REV. J       |
| MFG. APPR. | DP       | <b>D119-796-241</b>                                                                                                                                                                                                                                                      | SHEET 3 OF 7 |
| APPROVED   | WM       | TITLE                                                                                                                                                                                                                                                                    | SCALE        |
| DE APPR.   | DS       | <b>XTUBE ASSY (AW119 MKII AFT)</b>                                                                                                                                                                                                                                       | NTS          |
| DATE       | 17.02.10 | COPYRIGHT © 2014 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |

**D119-796-241BND CROSSTUBE, AFT** 9  
BENDING AND DRILLING DETAIL

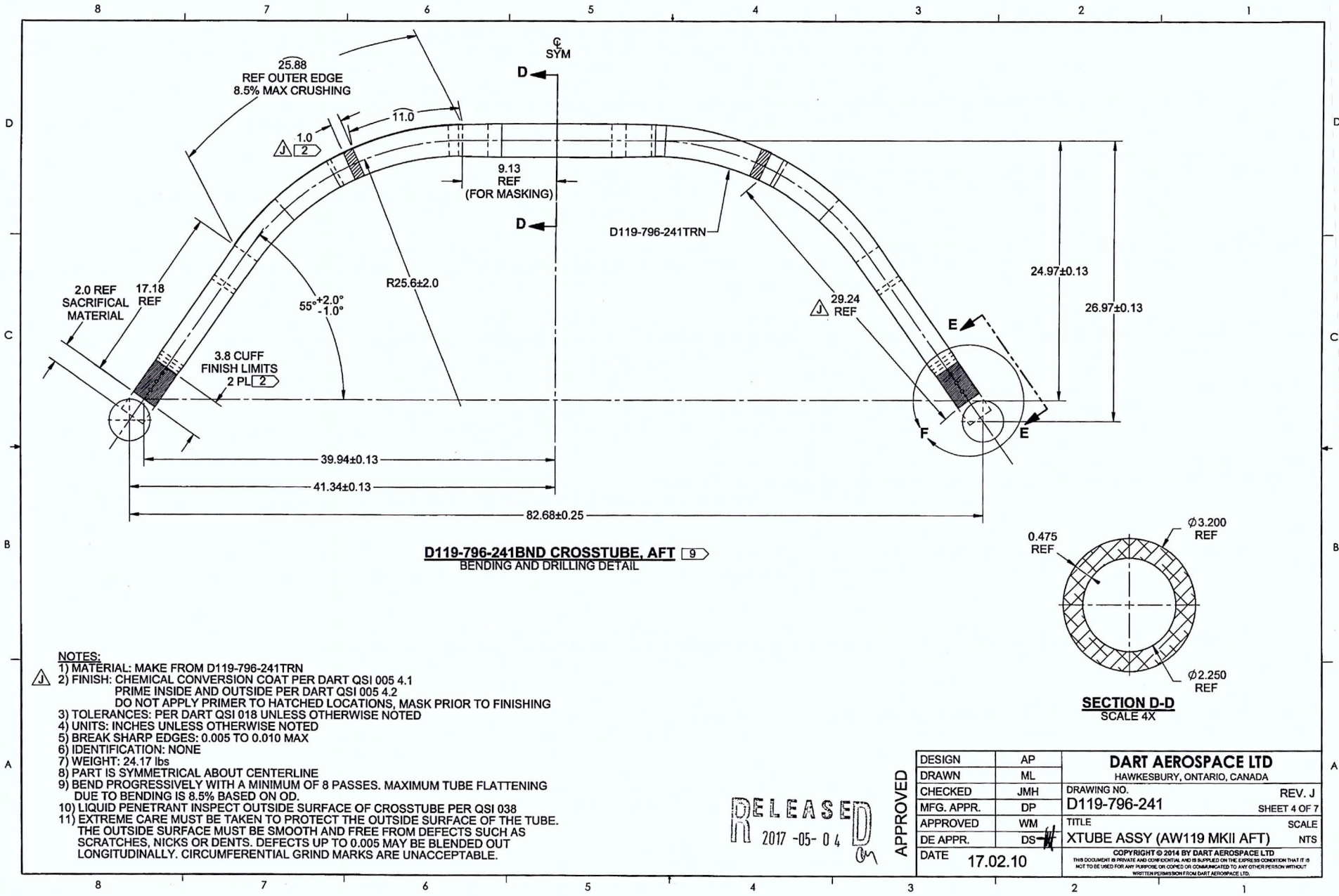
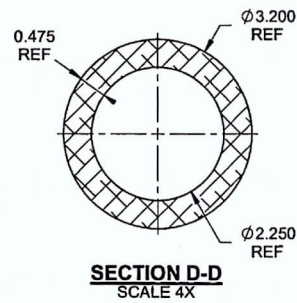
**NOTES:**

- 1) MATERIAL: MAKE FROM D119-796-241TRN
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
DO NOT APPLY PRIMER TO HATCHED LOCATIONS, MASK PRIOR TO FINISHING
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 24.17 lbs
- 8) PART IS SYMMETRICAL ABOUT CENTERLINE
- 9) BEND PROGRESSIVELY WITH A MINIMUM OF 8 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 8.5% BASED ON OD.
- 10) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038
- 11) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM DEFECTS SUCH AS SCRATCHES, NICKS OR DENTS. DEFECTS UP TO 0.005 MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.

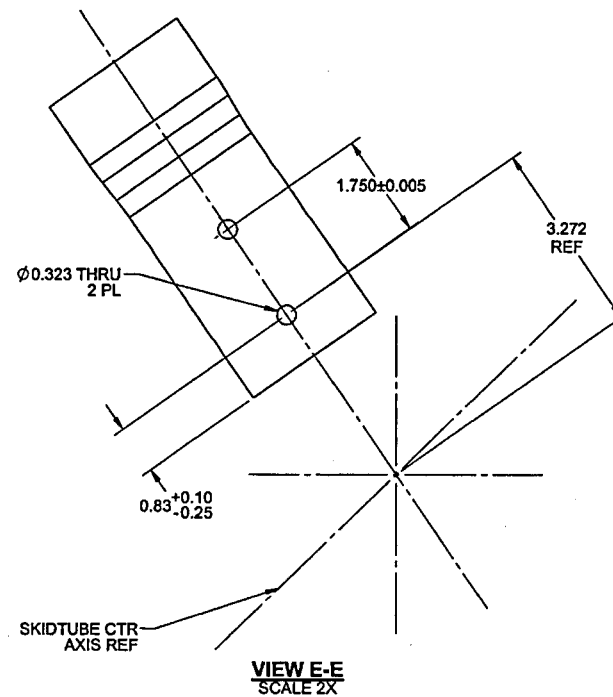
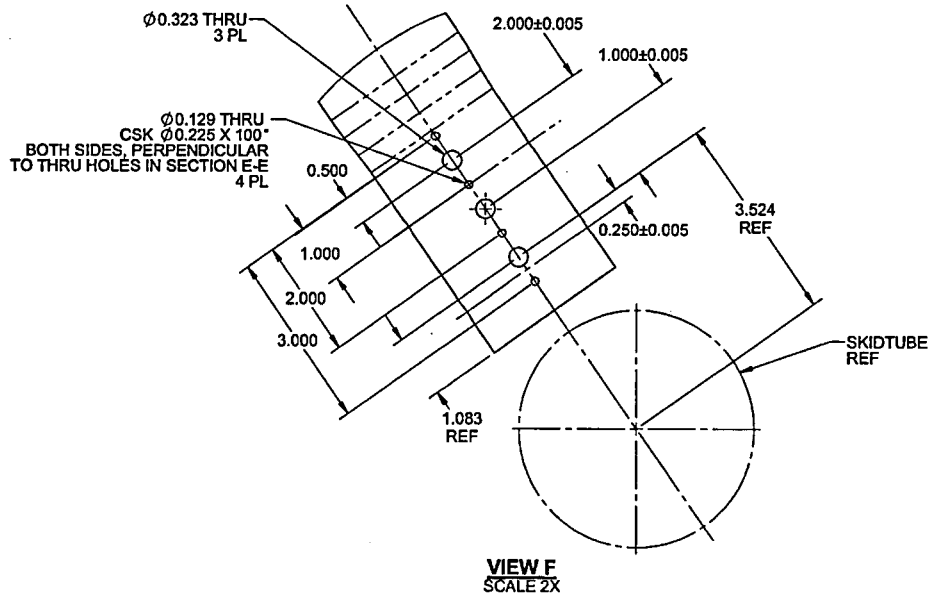
RELEASED  
2017-05-04

APPROVED

|                                                                                                                                                                                                                                    |          |                                        |              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------|--------------|
| DESIGN                                                                                                                                                                                                                             | AP       | <b>DART AEROSPACE LTD</b>              |              |
| DRAWN                                                                                                                                                                                                                              | ML       | HAWKESBURY, ONTARIO, CANADA            |              |
| CHECKED                                                                                                                                                                                                                            | JMH      | DRAWING NO.                            | REV. J       |
| MFG. APPR.                                                                                                                                                                                                                         | DP       | D119-796-241                           | SHEET 4 OF 7 |
| APPROVED                                                                                                                                                                                                                           | WM       | TITLE                                  | SCALE        |
| DE APPR.                                                                                                                                                                                                                           | DS       | XTUBE ASSY (AW119 MKII AFT)            | NTS          |
| DATE                                                                                                                                                                                                                               | 17.02.10 | COPYRIGHT © 2014 BY DART AEROSPACE LTD |              |
| THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. |          |                                        |              |



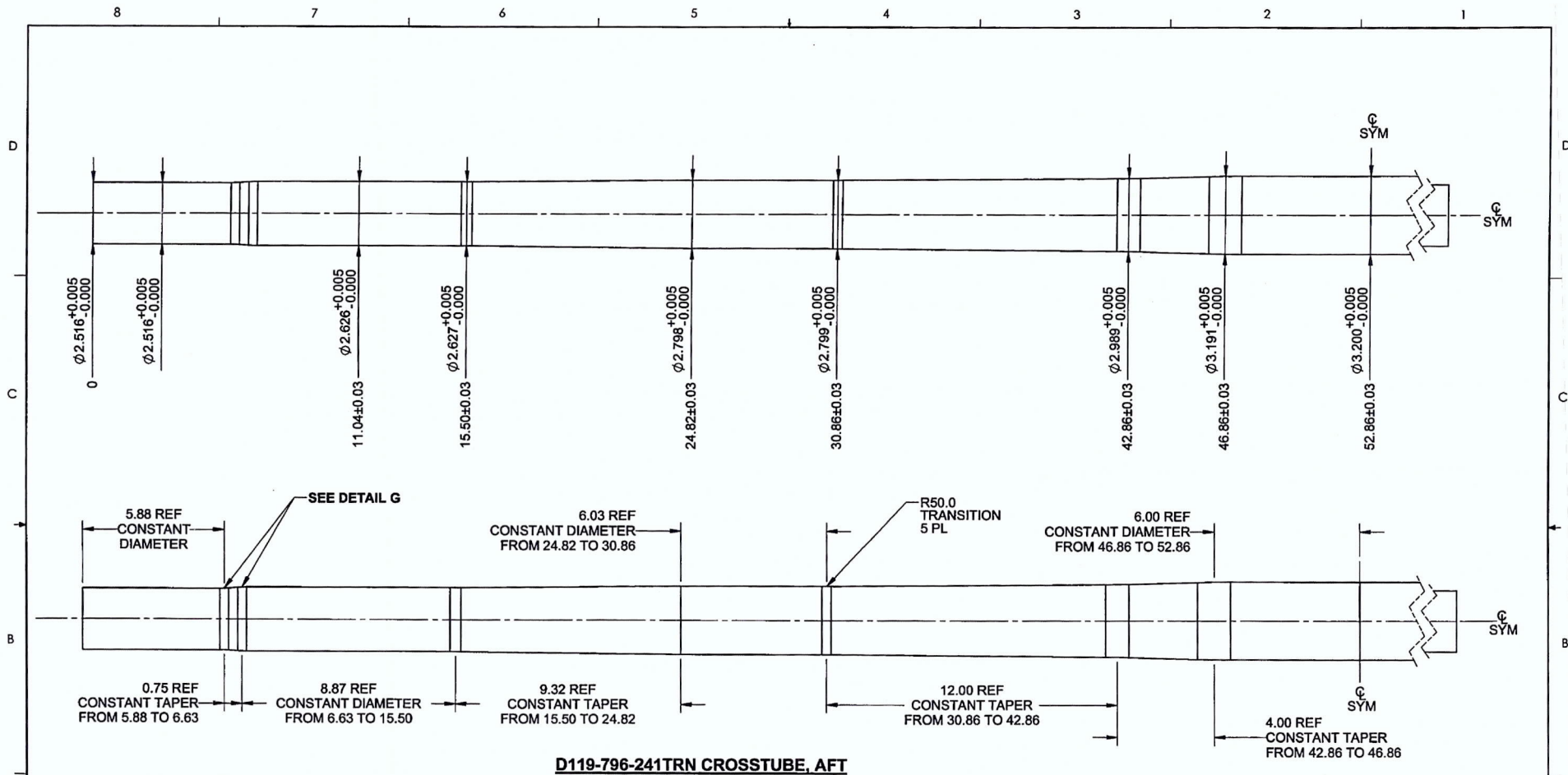




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|            |          |                                                                                                                                                                                                                                                                        |              |
|------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     | AP       | DART AEROSPACE USA, INC.                                                                                                                                                                                                                                               |              |
| DRAWN      | ML       | KENT, WA                                                                                                                                                                                                                                                               |              |
| CHECKED    | JMH      | DRAWING NO.                                                                                                                                                                                                                                                            | REV. J       |
| MFG. APPR. | DP       | D119-796-241                                                                                                                                                                                                                                                           | SHEET 5 OF 7 |
| APPROVED   | WM       | TITLE                                                                                                                                                                                                                                                                  | SCALE        |
| DE APPR.   | DS       | XTUBE ASSY (AW119 MKII AFT)                                                                                                                                                                                                                                            | NTS          |
| DATE       | 17.02.10 | COPYRIGHT © 2014 BY DART AEROSPACE USA, INC.<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR DISCLOSED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC. |              |



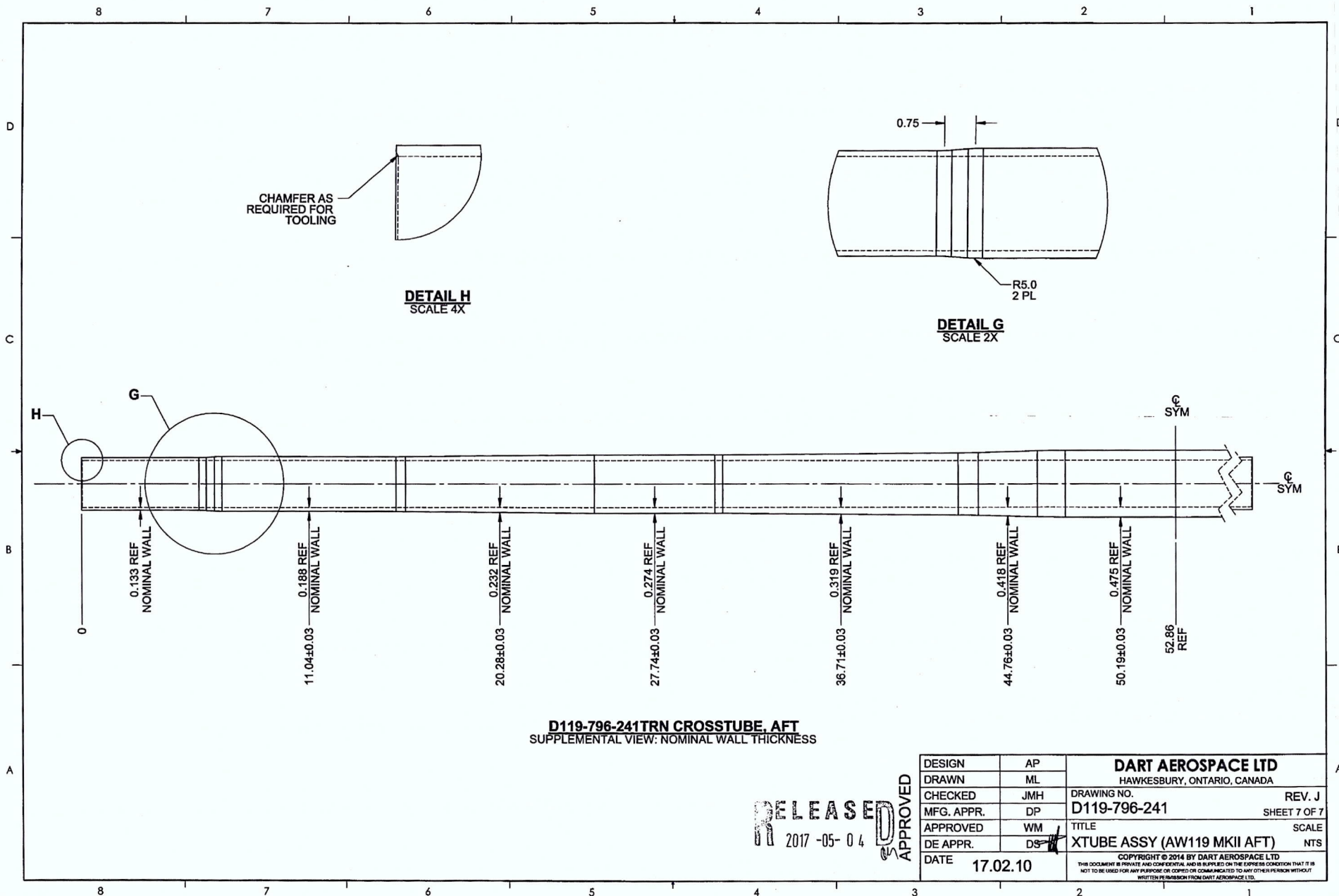
# NOTES:

- 1) MATERIAL: MANUFACTURE FROM D6023-106 (PREFERRED) OR D6009-106  
FINISHED LENGTH = 105.71 ±0.020 (BEFORE BENDING/TRIMMING)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 24.17 lbs
- 8) PART IS SYMMETRICAL ABOUT CENTERLINE

RELEASED  
2017-05-04

APPROVED

|            |          |                                                                                                                                                                                                                                                                      |              |
|------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     | AP       | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                             |              |
| DRAWN      | ML       |                                                                                                                                                                                                                                                                      |              |
| CHECKED    | JMH      | DRAWING NO.                                                                                                                                                                                                                                                          | REV. J       |
| MFG. APPR. | DP       | D119-796-241                                                                                                                                                                                                                                                         | SHEET 6 OF 7 |
| APPROVED   | WM       | TITLE                                                                                                                                                                                                                                                                | SCALE        |
| DE APPR.   | DS       | XTUBE ASSY (AW119 MKII AFT)                                                                                                                                                                                                                                          | NTS          |
| DATE       | 17.02.10 | COPYRIGHT © 2014 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS<br>NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT<br>WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |







# WORK ORDER NON-CONFORMANCE / UPDATE

AEROSPACE

| QA Closed: _____ Date: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     | Work Order update only <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| Work Order: <u>164349</u><br><br>Part No. <u>D119-796-241</u><br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">DISPOSITION</th> <th colspan="4" style="text-align: center;">AGAINST DEPARTMENT/PROCESS</th> </tr> <tr> <td>Rework</td><td><input type="checkbox"/></td> <td>Skid-tube</td><td><input type="checkbox"/></td> <td>Cross tube</td><td><input type="checkbox"/></td> <td>Water Jet</td><td><input type="checkbox"/></td> <td>Engineering</td><td><input type="checkbox"/></td> </tr> <tr> <td>Scrap</td><td><input checked="" type="checkbox"/></td> <td>Machining</td><td><input type="checkbox"/></td> <td>Small Fab</td><td><input type="checkbox"/></td> <td>Prod. Eng. Coord.</td><td><input type="checkbox"/></td> <td>Quality</td><td><input type="checkbox"/></td> </tr> <tr> <td>Use-as-is</td><td><input type="checkbox"/></td> <td>Thermoforming</td><td><input type="checkbox"/></td> <td>Finishing</td><td><input type="checkbox"/></td> <td>Rec/Store/Packaging</td><td><input type="checkbox"/></td> <td>Other</td><td><input type="checkbox"/></td> </tr> <tr> <td>Suspected Unapproved</td><td><input type="checkbox"/></td> <td>Large Fab</td><td><input type="checkbox"/></td> <td>Composite</td><td><input type="checkbox"/></td> <td>Supplier</td><td><input type="checkbox"/></td> <td></td><td></td> </tr> </table> |                          | DISPOSITION              |                          | AGAINST DEPARTMENT/PROCESS |                          |                          |                          | Rework                   | <input type="checkbox"/> | Skid-tube                           | <input type="checkbox"/> | Cross tube               | <input type="checkbox"/> | Water Jet                | <input type="checkbox"/> | Engineering              | <input type="checkbox"/> | Scrap                    | <input checked="" type="checkbox"/> | Machining                | <input type="checkbox"/> | Small Fab                | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Prod. Eng. Coord.  | <input type="checkbox"/> | Quality  | <input type="checkbox"/> | Use-as-is    | <input type="checkbox"/> | Thermoforming | <input type="checkbox"/> | Finishing | <input type="checkbox"/> | Rec/Store/Packaging | <input type="checkbox"/> | Other            | <input type="checkbox"/> | Suspected Unapproved | <input type="checkbox"/> | Large Fab           | <input type="checkbox"/> | Composite           | <input type="checkbox"/> | Supplier              | <input type="checkbox"/> |          |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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| DISPOSITION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     | AGAINST DEPARTMENT/PROCESS                                                                                         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| Rework                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | Skid-tube                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> | Cross tube               | <input type="checkbox"/> | Water Jet                  | <input type="checkbox"/> | Engineering              | <input type="checkbox"/> |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                                                                                                                                                                                               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| Scrap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input checked="" type="checkbox"/> | Machining                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> | Small Fab                | <input type="checkbox"/> | Prod. Eng. Coord.          | <input type="checkbox"/> | Quality                  | <input type="checkbox"/> |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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| Use-as-is                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/>            | Thermoforming                                                                                                      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| Suspected Unapproved                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/>            | Large Fab                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> | Composite                | <input type="checkbox"/> | Supplier                   | <input type="checkbox"/> |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                                                                                                                                                                                               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| Date : <u>18-05-15</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     | Step #: <u>120</u>                                                                                                 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| <p style="font-size: 1.2em;">Tubes over bent to 39.6</p> <p style="font-size: 1.2em;">Double checked it with Eng.</p> <p style="font-size: 1.2em;">and came back with 39,650</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                     | <p style="font-size: 1.2em;">Scrap destroy</p>                                                                     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| Equip/Tooling                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/>            |                                                                                                                    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| Material                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> |                                                                                                                    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| Internal Transport                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>            |                                                                                                                    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| Tribal Knowledge                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/>            |                                                                                                                    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| Past Expiry Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/>            |                                                                                                                    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| Misidentified                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/>            |                                                                                                                    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| No Re-verification                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>            |                                                                                                                    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| Operator                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>            |                                                                                                                    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| Offset/Setup                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>            |                                                                                                                    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| Supplier                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>            |                                                                                                                    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| Training                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>            |                                                                                                                    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| Use for Testing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/>            |                                                                                                                    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| Product Improvement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>            |                                                                                                                    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| Process Improvement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>            |                                                                                                                    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| Manufacturing Process                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/>            |                                                                                                                    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| Past Due                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>            |                                                                                                                    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| Pressure/Forced                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/>            |                                                                                                                    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| Bending                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/>            |                                                                                                                    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| Cracks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            |                                                                                                                    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| Crimp/Kink/Ripple/Wave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            |                                                                                                                    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| Cuffs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/>            |                                                                                                                    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| Crushing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>            |                                                                                                                    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| Heat Treat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |                                                                                                                    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| Wave/Twist in Tube                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>            |                                                                                                                    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| Marks/Chatter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/>            |                                                                                                                    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| OTHER :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/>            |                                                                                                                    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| Temperature/Cure                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/>            |                                                                                                                    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| Set-up                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            |                                                                                                                    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| BOM/Route                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/>            |                                                                                                                    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| Broken/Damage/Defect                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/>            |                                                                                                                    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| Inspection Incomplete/Unqualified                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>            |                                                                                                                    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| Contamination                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/>            |                                                                                                                    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| Countersink                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/>            |                                                                                                                    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| Cut Too Short                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/>            |                                                                                                                    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| Instructions Incomplete/Unclear                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/>            |                                                                                                                    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| Drill Holes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/>            |                                                                                                                    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| Power Loss/Surge                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/>            |                                                                                                                    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| Folio/Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/>            |                                                                                                                    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| Grain                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/>            |                                                                                                                    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| Weld                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/>            |                                                                                                                    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| Wrong Stock Pulled                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>            |                                                                                                                    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| Out of Sequence                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/>            |                                                                                                                    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| Off-set                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/>            |                                                                                                                    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| Mislabeled                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |                                                                                                                    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| Fit/Function                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>            |                                                                                                                    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| Misaligned/off center                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/>            |                                                                                                                    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| Positioned Wrong                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/>            |                                                                                                                    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| Outside Dimensions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>            |                                                                                                                    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| Over/Under tolerance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> |                                                                                                                    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| Part Incorrect                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/>            |                                                                                                                    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| Part Lost/Missing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>            |                                                                                                                    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| Part Moved                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |                                                                                                                    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| Drawing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/>            |                                                                                                                    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| Finish                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            |                                                                                                                    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| Misread                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/>            |                                                                                                                    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| Turning Sequence                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/>            |                                                                                                                    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